







**PAIMA 6<sup>th</sup> ANNUAL  
GOLF TOURNAMENT**  
Monday, September 30, 2019  
Harborside International Golf Club

***PAIMA and IAM members are welcome. Open Registration.***

**Member Information**

**Company Name:**

**City and Country:**

**Contact Person and E-mail address:**

**Player 1:** \_\_\_\_\_ **Handicap** \_\_\_\_\_ **Rental Clubs?** \_\_\_\_\_ **Left or Right?** \_\_\_\_\_

**Player 2:** \_\_\_\_\_ **Handicap** \_\_\_\_\_ **Rental Clubs?** \_\_\_\_\_ **Left or Right?** \_\_\_\_\_

**Player 3:** \_\_\_\_\_ **Handicap** \_\_\_\_\_ **Rental Clubs?** \_\_\_\_\_ **Left or Right?** \_\_\_\_\_

**Player 4:** \_\_\_\_\_ **Handicap** \_\_\_\_\_ **Rental Clubs?** \_\_\_\_\_ **Left or Right?** \_\_\_\_\_

❖ **Tournament Fees** \$175.00 per person x \_\_\_\_\_ = \$ \_\_\_\_\_

❖ **Golf Club Rentals** \$ 50.00 per person x \_\_\_\_\_ = \$ \_\_\_\_\_

**TOTAL: \$ \_\_\_\_\_**

**Payment Methods**

- CHECK: Drawn on US bank and made payable to PAIMA. Please include form and mail to below address.
- CREDIT CARD: Please fax or scan completed form to PAIMA. VISA and MASTERCARD are preferred.  
 Credit Card Number: \_\_\_\_\_  
 Expiration date: \_\_\_\_\_ Three-digit code on back of the card: \_\_\_\_\_  
 Name as it appears on card: \_\_\_\_\_  
 Total Amount to be charged: \_\_\_\_\_
- BANK TRANSFER: Please fax or scan completed form to PAIMA and we will send an invoice with our bank details.

**Confirmation:** Once registration form and payment is received, the name(s) of the participant(s) from your company will be added to the attendee list on the PAIMA website. Cancellations received after **September 1<sup>st</sup>** will not receive a refund.

PAIMA | 5201 Blue Lagoon Drive | 9<sup>th</sup> Floor | Miami, FL 33126 | USA  
 Tel: (954) 880-1085 | Fax: (786) 497-4017 | e-mail: [tony@paimamovers.com](mailto:tony@paimamovers.com)  
 Website: [www.paimamovers.com](http://www.paimamovers.com)